

AFFIDAVIT FOR SURRENDER OF CPA/PA CERTIFICATE

(Must be Notarized)

Tennessee State Board of Accountancy
500 James Robertson Pkwy
Davy Crockett Tower, 2nd Floor
Nashville, Tennessee 37243-1141

By:

(Licensee's Full Name and Address - print or type)

after being duly sworn, deposes and says:

I, _____, hereby advise the Tennessee State Board of Accountancy that I wish to voluntarily surrender my certificate as a Certified Public Accountant/Public Accountant.

I understand that by doing so I give up the right to use the title of certified public accountant or public accountant in any way in the State of Tennessee and the use of those titles which includes the abbreviations CPA, PA and the word Accountant.

Additionally, I understand that violation of Tennessee Code Annotated, Title 62, Chapter 1 and/or the rules and policies of the Tennessee State Board of Accountancy relating thereto in the State of Tennessee is cause for disciplinary action by the Tennessee State Board of Accountancy

Affiant Signature

Certificate Number

Date of Signature

Sworn and subscribed before me this _____ day of _____, 20_____.

Notary Public Signature

My Commission Expires:

(Seal)
